



2018

# BOROUGH OF GREEN TREE PART-TIME POLICE OFFICER APPLICATION PACKAGE

To All Interested Applicants:

In accordance with the Collective Bargaining Agreement, Green Tree Borough will be accepting applications for the position of **Part-Time Police Officer**.

Applications will be taken on a continual basis and will be held on file for a maximum of one-year (1-year) from the date of submission.

Completed applications can be submitted via mail or hand delivered to: Borough of Green Tree, Administrative Office, 10 West Manilla Avenue, Green Tree, PA 15220.

The Borough of Green Tree is an Equal Opportunity Employer. (EOE)

W. David Montz, Manager  
BOROUGH OF GREEN TREE

DATE RECEIVED \_\_\_\_\_

TIME RECEIVED \_\_\_\_\_

RECEIVED BY \_\_\_\_\_





11. FAMILY. List in order given showing relationship, parents, guardians, stepparents, foster parents, parents-in-law, brothers, sisters, stepbrothers and stepsisters. Include any others with whom you have resided or with whom a close relationship existed or exists.

Relationship	Name	Address If Living
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Father \_\_\_\_\_

Mother \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

12. VEHICLE OPERATOR'S LICENSE. Give the following information concerning any vehicle operator's license you have held or now hold.

Type of License	Number	Issuing Authority	Expiration
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\_\_\_\_\_

\_\_\_\_\_

Have you ever had a license suspended or revoked?  Yes  No

If Yes, please elaborate: Date of Suspension Revocation: \_\_\_\_\_

Reason(s): \_\_\_\_\_

13. Have you successfully completed Act 120 training and are you presently able to be certified by M.P.O.E.T.C.?  Yes  No MPOETC #: \_\_\_\_\_

14. CONVICTION OF CRIME.

Have you ever been convicted of, or plead guilty or no contest to a criminal charge constituting a misdemeanor, felony or greater criminal violation?  Yes  No

If yes, state violation, court of jurisdiction and date of conviction.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

15. FINANCIAL STATUS.

Do you have any income from any source other than your principal occupation?  Yes  No

How much? \_\_\_\_\_ How often? \_\_\_\_\_

The source(s) \_\_\_\_\_

16. Do you have or have you had any financial account (savings, checking, loans, stocks, bonds, etc.)?

List all accounts during the past seven (7) years.

Name and Address of Financial Institution	Type of Account

17. PAST AND PRESENT MEMBERSHIP IN ORGANIZATIONS

Name	Address	Zip	Type (Social, Fraternal, Professional, etc.)	Office Held	Membership Dates From	To

18. SUBVERSIVE ORGANIZATIONS. Please write: (Yes/No)

\_\_\_\_\_ Are you now or have you ever been a member of any organization, association, movement, group or combination of persons which advocates the overthrow of our constitutional form of government, or which has adopted the policy of advocating or approving the commission of acts of force or violence to deny other persons their rights under the Constitution of the United States or which seeks to alter the form of government of the United States by any unconstitutional means?

\_\_\_\_\_ Are you or have you ever been affiliated or associated with any organization of the type described above, as an agent, official or employee?

\_\_\_\_\_ Are you now associating with, or have you associated with, any individual, including relatives, who you know or have reason to believe are or have been members of any of the organizations identified above?

\_\_\_\_\_ Have you ever been engaged in any of the following activities of any organization of the type described above: Distribution(s) to, attendance at or participation in any organizational, social or other activities of said organization or any projects sponsored by them; the sale, gift, or distribution of any written, printed or other matter, prepared, reproduced, or published by them or any of their agents or instrumentalities?

If yes to any of the answers above, describe the circumstances. Attach additional sheets for a fully detailed statement. If associated with any of these organizations, specify nature and extent of association with each, including office or position held. Also include dates, places and credentials now or formerly held. If associations have been with individuals who are members of these organizations, then list the individuals and the organization with which they were or are affiliated.

19. EDUCATION. List all elementary, junior high and high schools attended.

Name	Address	City	Zip	Graduated Yes/No
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A. Higher Education. List all colleges or universities attended. Attach transcript from last institution.

Name	City	Zip	Years Attended	Credit Hours Semester/Quarter	Degree Received
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B. Major and Minor Courses.

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C. Other Schools or training (trade, vocational, military). List for each the name and location of school, years attended, subjects studied, certificate earned, and any other pertinent data. Include complete mailing address.

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20. FOREIGN LANGUAGE. Enter language and indicate fluency.

Language	Reading	Speaking	Understanding	Writing
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21. EMPLOYMENT. Begin with your most recent job and list your work history for the past 10 years, including part-time, temporary or seasonal employment and all periods of unemployment.

From Date	Name and Address of Employer	Job Title	Reason for Leaving
To Date		Description of Duties	
Salary	Name of Supervisor	Name of Co-Worker	

From Date	Name and Address of Employer	Job Title	Reason for Leaving
To Date		Description of Duties	
Salary	Name of Supervisor	Name of Co-Worker	

From Date	Name and Address of Employer	Job Title	Reason for Leaving
To Date		Description of Duties	
Salary	Name of Supervisor	Name of Co-Worker	

(If additional employer blocks are needed, attach requested information on separate sheet.)

Have you ever been discharged, asked to resign, furloughed, or put on inactive status for cause, or subject to disciplinary action while in any position (except military)? If yes, state reason.

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Have you ever resigned after being informed your employer intended to discharge you for any reason? If yes, explain. List name and address of employer, approximate date and reasons in each case.

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22. MILITARY STATUS

Yes

No

Have you ever served in the U. S. Armed Forces?  
If yes, attached photocopy of discharge or separation papers.

\_\_\_\_\_

\_\_\_\_\_

A. While in the military service, were you ever convicted for any crime graded as a misdemeanor, felony or greater offense?  
If yes, list date, place, law enforcing authority or type of court or court martial, charge and action taken for each incident. Use separate sheet to record this information.

\_\_\_\_\_

\_\_\_\_\_

B. Are you presently a member of a U. S. Reserve or State Guard Organization? If yes, complete the following:

\_\_\_\_\_

\_\_\_\_\_

Grade and Service No.: \_\_\_\_\_

Service and Component: \_\_\_\_\_

Organization and Station or Unit and Address:  
\_\_\_\_\_

Indicate reserve obligation, if any: \_\_\_\_\_

Are you claiming Veteran's preference? \_\_\_\_\_ (If yes, include a copy of your DD 214)

23. Police Service Verification/employment History: Applicant must have a minimum of 2000 hours work experience as full-time or part-time police officer in the Commonwealth of Pennsylvania.

Police Department	Dates of Service From: To:	Full Time or Part Time	Supervisor / Chief (Include Phone #)	Number of hours per week	Estimated Total Hours

Note to applicant: You may be required to provide copies of past work schedules or pay-stubs to verify work history.

24. CHARACTER REFERENCES. List five (5) character references that have definite knowledge of your qualifications for the position of application. (Do not list relatives, former employers or persons living outside the United States.)

Name	Address	Home Phone	Work Phone	Years Known
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25. Are there any incidents in your life not mentioned herein which may reflect upon your suitability to perform the duties which you may be called upon to take or which might require further explanation? If yes, provide details.

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26. Have you ever been dismissed from public service for delinquency or misconduct of office? If yes, provide details.

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## APPENDIX A

### NOTIFICATION PROCEDURE RELEASE

In the processing procedure required for applicants, it may become necessary to contact the applicant in the event he/she is being given further consideration for the position of part-time police officer with the Green Tree Borough Police Department.

If conventional methods fail in attempting to contact the applicant, a certified or registered letter will be sent to the applicant's address listed on the application. Should the registered letter be returned indicating that it was unclaimed or undeliverable; the applicant will be eliminated from further processing and consideration.

It is the applicant's responsibility to notify the Borough of Green Tree, in writing, of the address change. By affixing your signature to this form, the applicant acknowledges reading and understanding the contents of this procedure.

\_\_\_\_\_

Date

\_\_\_\_\_

Signature

**APPENDIX B**

**WAIVER AND RELEASE FOR BACKGROUND INVESTIGATION**

I, \_\_\_\_\_ (Name of Applicant), hereby give Green Tree Borough the right to make a thorough investigation into my background, previous employment, education and references in order to ascertain my suitability for service as a part-time police officer.

I release from all liability and claims any and all persons, companies and corporations (public and private) supplying any information whatsoever to representatives of Green Tree Borough. This includes and is not limited to parties with whom I have entered into a written or oral agreement which contains a confidentiality clause.

I release, indemnify and hold harmless Green Tree Borough, its officials, officers and employees from and against any and all liability which might result from conducting such an investigation.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
State of \_\_\_\_\_ )  
County of \_\_\_\_\_ ) S.S.

On this, the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me a notary public, the undersigned officer, personally appeared \_\_\_\_\_, known to me (or satisfactorily proven) to be the person whose name is subscribed to the within instrument, and acknowledged that he/she executed the same for the purposes therein contained.

In witness whereof, I set my hand and official seal.

My commission expires:

\_\_\_\_\_  
Notary Public

## APPENDIX C

### ESSENTIAL DUTIES OF A GREEN TREE BOROUGH POLICE OFFICER

1. Running for several hundred yards.
2. Climbing over obstacles.
3. Crawling.
4. Pushing motor vehicles.
5. Pulling or carrying accident, fire or crime victims.
6. Using physical force to apprehend and subdue arrestees.
7. Withstanding prolonged exposure, as long as eight hours, to extreme weather conditions.
8. Withstanding prolonged periods of standing and sitting.
9. Withstanding frequent exposure to stress-producing situations such as encountering persons injured or killed by accidents, crimes or suicide.
10. Dealing with domestic disputes.
11. Dealing with verbal and physical abuse of the officer, including taunts, insults, and threats to the officer, members of his family, or fellow police officers.
12. To communicate effectively with individuals suffering from trauma.
13. Operate a motor vehicle for long periods of time.
14. Use a firearm effectively.
15. Complete written reports in a clear and concise manner.

I have reviewed the above list of essential job functions for a Green Tree Borough Police Officer and believe that:

- \_\_\_\_\_ I can fully perform all duties without reasonable accommodations.
- \_\_\_\_\_ I can fully perform all duties but only with the following reasonable accommodations for the duties specified. Specify: \_\_\_\_\_
- \_\_\_\_\_ I cannot fully perform all duties even with reasonable accommodations.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date